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APPLICANTS Wei-Cheng Wang, Panchiao City, TAIWAN; <i>CF</i>				
** CONTINUING DATA ***** <i>CF</i>				
** FOREIGN APPLICATIONS ***** <i>CF</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY** <i>CF</i> ** 05/26/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and <i>ad</i> Acknowledged <i>CF</i> Examiner's Signature Initials		STATE OR COUNTRY TAIWAN	SHEETS DRAWING 6	TOTAL CLAIMS 9
			INDEPENDENT CLAIMS 4	
ADDRESS Jackson Walker L.L.P. Suite 2100 112 E. Pecan Street San Antonio, TX78205				
TITLE Method for moderation of back pain				
FILING FEE RECEIVED 428	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	